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<p>Substitute for form 1449/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p><i>(Use as many sheets as necessary)</i></p>				Complete if Known	
				Application Number	10/764,279
				Filing Date	01/22/2004
				First Named Inventor	Francesca B. Kuglen
				Art Unit	3732
				Examiner Name	Robyn K. Doan
Sheet	1	of	1	Attorney Docket Number	K551-003.B

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

** Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language translation is attached.*
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